Fill in this information	n to identify your case:	
Debtor 1	Brenda Mervine	_
Debtor 2 (Spouse, if filing)	Russell A. Mervine, Sr.	_
United States Bankro	uptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
Case number 2	2-11415MDC	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Forn	n 106 <u>l</u>	MM / DD/ YYYY
Schedule I	Your Income	12/1

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Describe Employment						
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed	■ Employed□ Not employed			
	employers.	Occupation	NONE	Police Officer			
	Include part-time, seasonal, or self-employed work.	Employer's name		Trainer Borough			
	Occupation may include student or homemaker, if it applies.	Employer's address		824 Main Street Marcus Hook, PA 19061			
		How long employed th	nere?	-			

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 3,538.25 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 3. Calculate gross Income. Add line 2 + line 3. 0.00 3,538.25

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Deb Deb	tor 1 tor 2	Brenda Mervine Russell A. Mervine, Sr.		Case ı	number (<i>if known</i>)	22-114	15MDC	
	Con	vy line 4 hore	4	For \$	Debtor 1		ebtor 2 or ing spouse	
	Cop	y line 4 here	4.	Φ	0.00	Φ	3,538.25	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	727.05	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	28.88	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	755.93	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	2,782.32	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce	0-	Ф.	0.00	Φ.	0.00	
	04	settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.	\$_ \$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: SNAP	_ 8f.	\$	1,147.00	\$	0.00	
		son's Disability		\$	863.00	\$	0.00	
		Daughter Contribution	_	\$	350.00	\$	0.00	
	8g.	Pension or retirement income	_ 8g.	\$	0.00	\$	2,001.00	
	8h.	Other monthly income. Specify: Pro rated Tax Refund	8h.+	\$	0.00	+ \$	120.00	
		Daughter Assistance/Contribution	_	\$	500.00	\$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,860.00	\$	2,121.00	
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$	2	2,860.00 + \$	4,903	3.32 = \$ 7	,763.32
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			, 	,		,
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen		•		edule J. 11. +\$	0.00
12.	Add	the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					12. \$ 7	,763.32
13.	Do y	you expect an increase or decrease within the year after you file this form?	?				monthly i	ncome

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Yes. Explain: DEBTOR/WIFE WAS OUT OF WORK TWO MONTHS DUE TO SURGERY